

**Appropriations Committee Informational Hearing on the
Impact of COVID-19 on the Office of Early Childhood
OEC Response – July 12, 2020**

1. **Please provide a brief description of each of your CTCARES Programs- target group, # served, average assistance amount, total amount expended to date, estimated FY 21 cost.**

CT CARES for Hospital Workers

CTCARES for Hospital Workers — also known as Project 26 — **helped hospital employees find emergency child care** during COVID-19. The program opened March 23, 2020 and closed June 26, 2020. It was the first program launched by the Office of Early Childhood (OEC) in response to COVID-19, since healthcare workers are part of the public health emergency. It also worked closely with the EOC to assure open child care spaces were available in programs based on regional concerns for hospital surges.

With a generous gift of \$3 million from Dalio Philanthropies, 28 child care locations were opened to serve workers at 29 hospitals. This project was a collaboration with the OEC, Capitol Region Education Council (CREC), community-based child care providers, hospital human resource departments, and 211 Child Care.

# Children Served	566
Average Assistance \$ Per Classroom	**Per Classroom
Total \$ Expended to Date – Philanthropic (\$3M) and State (\$292,575)	\$3,292,575
Estimated FY21 Cost	\$0

**One Classroom - \$4,287
Two Classrooms - \$8,575
Three Classrooms - \$11,725

CTCARES for Child Care

CT CARES for Child Care **provided additional funding for any licensed child care providers – centers, group family child care homes, and family child care homes – who remained open and served essential workers.** Child care is identified as an essential function during the COVID-19 public health emergency, and CTCARES for Child Care supported essential workers as defined in the Governor’s Executive Order. The program opened April 4, 2020 and new applications closed July 3. The program was paid for with federal CARES ACT funding. It was the second program launched by the Office of Early Childhood (OEC) in response to COVID-19.

For licensed family child care homes:

- 1 to 2 children of essential workers: \$200 each week
- Each additional child of an essential worker at half-time: \$50 per child each week.

For licensed child care centers:

- 1 to 5 full-time equivalent children: \$275 each week
- 6 to 12 full-time equivalent children: \$550 each week
- 14 or more full-time equivalent children: \$825 each week

# Children Served	11,633
Average Assistance \$ Per Child	\$502
Total \$ Expended for FY20 Federal CARES Act Funds	\$4,244,150
Total \$ to be Expended for FY21 Federal CARES Act Funds	\$1,590,000
Total Cost	\$5,834,150

CTCARES for Frontline Workers

CTCARES for Frontline Workers helped frontline workers pay for child care at licensed child centers, group child care homes, and family child care homes. Frontline workers include: first responders; child care workers; grocery workers; workers at state facilities; home/group home care workers; and people providing in-home services. The program opened April 27 and new applications closed June 15, 2020. The program was paid with federal CARES Act funds. It was the third program launched by the Office of Early Childhood (OEC) in response to COVID-19.

# Children Served	3,342
Average Assistance \$ Per Child	\$671
Total \$ Expended for FY20 State CCDF Funds (FEMA potential)	\$1,360,250
Total \$ to be Expended for FY21 State CCDF Funds (FEMA potential)	\$882,600
Estimated FY21 Cost	\$2,242,850

CTCARES for Family Child Care

CTCARES for Family Child Care is an initiative designed to support the unique needs of licensed family child care during COVID-19 and recovery. The program will connect providers with a Family Child Care Network to offer supports to keep the program operating. It opened May 13, 2020 and will continue through FY21.

Family Child Care Networks are community initiatives that have paid staff with expertise working with family child care providers. They offer a number of ongoing support services and resources to affiliated family child care providers, which may include professional development, coaching and consultation, and business and administrative supports.

Philanthropic partners are funding EdAdvance, one of the 6 current Regional Education Service Centers, to administer the CTCARES for Family Child Care initiative. The philanthropic funders are 4-CT (\$544,865), CT Early Childhood Funder Collaborative (\$392,500) and the CT Health Foundation (\$51,000). EdAdvance will provide staffing to plan, conduct outreach, provide networks support, evaluation, administration (contracting with other 11 Networks and support services), and fiduciary responsibilities. EdAdvance is taking a 5% administrative fee.

The OEC will use \$1 million of federal CCDF funds already budgeted in our CCDF spend plan to continue FCC Network supports through FY 21. We will issue an RFP in spring of FY 21 for continued operations in FY 22.

# Served	100% of family child care providers will receive outreach and information about supports from this project
Average Assistance \$	There are no direct dollars to providers from this project.
Total \$ Obligated to Date Philanthropic Funding of \$988,365	Philanthropic funding totaling \$988,365 was directed to EdAdvance, which is administering the program.
Estimated OEC FY21 Cost Federal CCDF Quality Funds	\$1 million

CTCARES for Child Care Businesses

CTCARES for Child Care Businesses provides an array of financial supports to child care businesses during COVID-19 and recovery. The program opened June 29, 2020 and is scheduled to close September 19, 2020. It is paid for with \$10.5M in federal CARES Act funding. This is the most recent CTCARES program to open; to date, no funds have been expended.

CTCARES for Child Care Businesses offers the following:

- **Expense Kickstart:** This is a lump sum for expenses like payroll, utilities, and rent or mortgage to help programs be open. The amount of funding depends on the size of the program and National Association for Family Child Care (NAFCC) or National Association for the Education of Young Children (NAEYC) Accreditation status. Kickstart is limited to programs with less than 50% of revenue from public funds and programs must be open or verify reopening with two weeks of application. This is funded with \$8M in federal CARES Act funds.
- **Supply Subsidy:** Providers have increased cleaning, personal protective equipment (PPE), and nurse consultation during COVID-19. This funding is designed to help cover the added costs of maintaining a healthy environment for children, families, and staff. This is funded with \$2.5M in federal CARES Act funds.
- **Training subsidy:** This subsidy helps cover the cost of First Aid, CPR, Medication Administration, and Emergency Anaphylactic Medication Administration (“EpiPen®”)

certification expiring during COVID-19. This training will not start until it is determined that in-person training is safe. The training subsidy is supported with federal CCDF quality funds.

# Served	Not yet known. Every licensed program is eligible for supply bonus.
Average Assistance \$ Per Program	Subsidies range from \$1,850 to \$7,200 depending on program size
Total \$ Expended to Date	No payments made yet
Estimated FY21 Cost Federal CARES Act Funds	\$10.5M

2. Please share data on the number of OEC funded direct care providers who have been tested and the associated cost. What funds support this?

The OEC followed the Standard Operating Procedure put in place by the State's Unified Command and implemented by DOT to ensure testing was accessible to child care providers. The OEC issued a memo to all licensed and OEC funded providers regarding testing on May 22, and revised on June 2. We received three requests for testing; one person accessed the testing site.

3. How has Care4Kids caseload/costs changed since February?

C4K costs have remained consistent between February and June because the OEC paid providers for the months of April, May and June based on March enrollments due to COVID-19.

- February, 2020 = \$10.9M
- March thru June 2020 = \$11.2M per month
- Another \$2M will be paid out this summer to reconcile invoices and payments.

CASELOAD:

- Caseload numbers stayed steady because March, April, and May redeterminations were extended 3 months to June, July and August due to COVID-19. Additionally, last year OEC implemented a policy to extend continued benefits up to 65% of SMI to address this child care benefit cliff.
- As of July, caseload is starting to drop. This includes normal attrition of about 50% of redeterminations.
- The number of redeterminations that we will receive will be higher than normal because of the 3-month extensions for March, April and May, but that number can be handled due to lower renewal return rates and lower new applications.

Care 4 Kids (C4K) Caseload #s for SFY 2020 & March-June in SFY2019		
# of Families and # of Children where payments had been made by July 1, 2020. June 2020 shown as the Active # as of 6/30/2020 (not paid yet).		
	Children	Families
Month	# of Children Served in Care 4 Kids in the Month (Cumulative count)	# of Families Served in Care 4 Kids in the Month (Cumulative count)
March 2019	17,313	11,938
April 2019	17,393	12,006
May 2019	17,284	11,936
June 2019	18,229	12,289
SFY20		
July 2019	17,795	12,006
August 2019	18,400	12,389
September 2019	16,666	11,619
October 2019	17,074	11,910
November 2019	17,421	12,137
December 2019	17,439	12,169
January 2020	17,774	12,409
February 2020	18,017	12,592
March 2020	17,972	12,509
April 2020	16,567	11,527
May 2020	16,354	11,316
June 2020*	17,768	12,264
Monthly Average SFY20	17,437	12,071
OEC 07/10/2020	(Source: SFYs 19 & 20: ImpaCT Child Care Ad Hoc Report 07/01/2020 OEC Analysis. If Payment for Services made by 07/01/2020. *June, 2020 were Active 6/30/2020, not Paid.	(Source: SFYs 19 & 20: ImpaCT Child Care Ad Hoc Report 07/01/2020 OEC Analysis. If Payment for Services made by 07/01/2020. *June, 2020 were Active 6/30/2020, not Paid.

APPLICATIONS:

- Applications that came in for March through June were down significantly from past years during the same months; therefore, caseload is not building from new applications. Note that from March – June, all providers were paid.

Care 4 Kids Applications Received from Families vs Prior Year Trends			
Month	% Applications Received to Trend	# Applications Received	Prior Year Trend / Expected # Applications Received
January 2020	90%	1285	1435
February 2020	77%	1080	1395
March 2020	52%	760	1460
April 2020	15%	225	1485
May 2020	18%	325	1780
June 2020	34%	710	2080
Mar-Jun Average	30%	505	1701

PAYMENT PROCESSING:

- Payment processing has not slowed and it is anticipated to remain steady.

4. Is OEC prepared to process redeterminations that were extended without delays in provider payments?

Yes, the OEC is prepared to process redeterminations without delays.

5. How has Birth-to-Three caseload/costs changed since February?

The weekly count of referrals dropped significantly due to the COVID-19 public health emergency. It has recently increased somewhat but remains 26% below the average from January through March 6, 2020 (week 10). Referrals and calls to Child Development Infoline are illustrated in an attachment.

The number of children with Individualized Family Service Plans (IFSPs) on June 30, 2020 (under age 3) was 5,404, which is down 350 from March 1, 2020.

The costs for providing Early Intervention Services (EIS) has not changed since programs must continue to retain critical highly qualified staff to provide EIS remotely. The average amount that programs were paid by the OEC for services provided in April and May of 2020 was 15% lower than for the period June 2019 through February 2020. The reduced payment is primarily related to the decrease of intensity of supports for families with children with an autism spectrum disorder. Overall, expenditures by the OEC in FY20 was about \$242,030 less than the projection made in August 2019.

6. How many children over age 3 continued to receive services through June? What was their associated cost? What does their transition look like when schools reopen?

The June invoices from EIS programs will not be completed until July 16 so data about June services are preliminary. Of the 1,273 eligible children who turned age 3 between March 16, 2020 and June 30, 2020, only 721 are still enrolled in Birth to Three. The families of 440 of those 721 children received at least one EIS service over age 3.

The cost to the system (OEC, Medicaid, Commercial Insurance) for all EIS provided to children over age 3 through June is projected to be \$470,610. If nothing changes, the OEC expects that the IEPs for all children over age 3 will be implemented and they will exit Birth to Three when schools reopen.

7. What is the status of the RFP for home visiting?

All home visiting, both state funded and federally funded Maternal, Infant and Early Childhood Home Visiting (MIECHV) programs, are going out for re-procurement. This RFP is a system redesign that is based on a years' worth of work that includes: family focus groups, community listening sessions, Early Childhood Stakeholder group, provider survey, and a needs assessment that includes geospatial mapping of the state. We are focused on an approach based on expressed family needs and community input – and enhanced child and family outcomes. A decision has not been made about the target population

OEC is on target for completion and release of the RFP for September 1, 2020. The RFP team meets weekly and met with the Commissioner July 8 to review progress to date as well as review data to make critical decisions and continue working toward completion.

8. How has home visiting caseload changed? How has telehealth worked for this population?

Home Visiting caseloads have remained steady and services continue to be provided to families on a regular reoccurring basis through telehealth/virtual home visits. These visits have been positive and successful with families. Telehealth/virtual visits take place 1-2 times a week through a variety of platforms and allow the home visitor and family to have positive, meaningful interactions. Feedback from the field has been overwhelmingly positive and many home visitors feel as though they are more connected to their families.

9. Are you planning to increase full-day child care rates for providers in FY 21 as funded in the biennial budget (\$2.7 million)?

Due to COVID-19, we have developed and implemented an interim July and August spend plan for School Readiness and Child Day Care programs. Under the plan, we are paying double per child to compensate for the reduced classroom size of 14 and cost of enhanced health and safety requirements. We are working with OPM on a funding plan for School Readiness and Child Day Care programs for September 2020 through June 2021.

10. How many child care centers have permanently closed?

It is too soon to determine how many providers have permanently closed. Many have yet to re-open since the pandemic, but indicate that they intend to re-open. 18 have closed their doors permanently according to UCONN.

The OEC is tracking the number of open and closed providers via survey implemented by the United Way of CT 211. They launched the survey on March 13, 2020 and have reported data up to June 29, 2020. 90% of providers (3,534 providers) have responded to the survey. The graph below shows the increasing trend toward programs re-opening over the past two weeks.

As of June 29, 2020, 44.6% or 1,763 providers reported they were closed. This is a decrease of 16 providers since June 22, 2020. Most of these providers re-opened. This includes most school-based programs that are closed following local guidance. For the first time, there are more child care providers open (1,771) than closed (1,763) since the Covid-19 public health emergency began. Another 10% of providers had still not responded to the survey.



